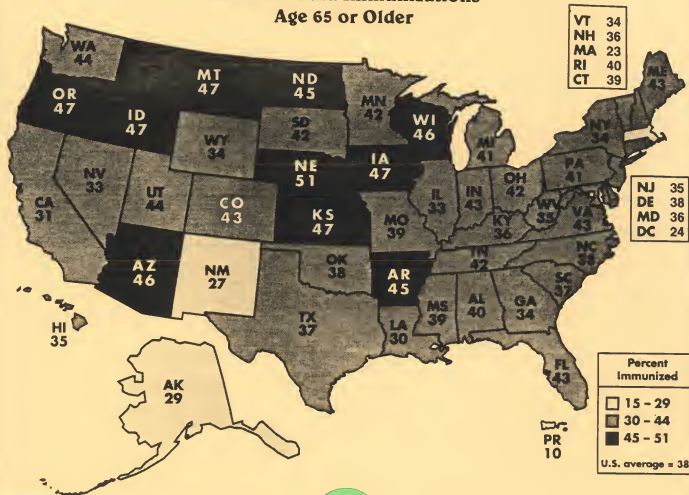


RA
644
.I6
I535
1994



1994 INFLUENZA IMMUNIZATIONS PAID FOR BY MEDICARE

Percent of All Beneficiaries With Medicare-Paid Immunizations Age 65 or Older



These data reflect claims paid by Medicare for non-HMO beneficiaries only. Total immunization rates may be higher in those areas with free or publicly-supported programs.

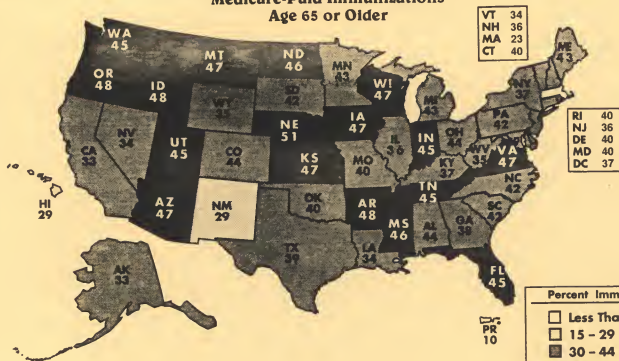
Source: Health Care Financing Administration (HCFA), administrative claims data files, September 1 - December 31, 1994.

* The rate for Puerto Rico is not included in the total U.S. rate.

PUBS
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1994

1994 INFLUENZA IMMUNIZATIONS PAID FOR BY MEDICARE

Percent of Caucasian Beneficiaries With Medicare-Paid Immunizations Age 65 or Older



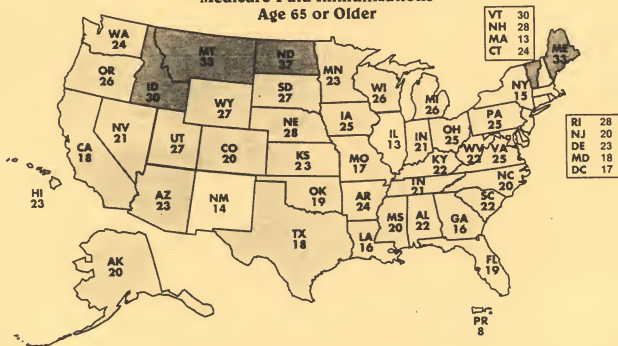
Percent Immunized

- ☐ Less Than 15
☐ 15 - 29
☒ 30 - 44
☐ 45 - 51

*Caucasian average = 40

*African Am. avg. = 20

Percent of African American Beneficiaries With Medicare-Paid Immunizations Age 65 or Older



Source: Health Care Financing Administration (HCFA), administrative claims data files, September 1 – December 31, 1994.

* The rate for Puerto Rico is not included in the total U.S. rate.

1994 Influenza Immunizations Paid for by Medicare: Overview and Technical Notes

Overview

The data reported here reflect the second year of claims experience since HCFA began reimbursing providers for influenza vaccine and its administration on May 1, 1993. Approximately thirty-eight (38) percent of Medicare beneficiaries age 65 years or older in the fee-for-service sector received an influenza vaccination in 1994 that was paid for by HCFA. This finding indicates an attainment of more than half of the Department of Health and Human Services Year 2000 goal to achieve a 60 percent influenza immunization rate for all persons age 65 years or older. It also represents an increase of more than 1 million flu shots paid for by Medicare in 1994 compared to 1993.

The national influenza vaccination rate for African American beneficiaries is approximately one-half the rate for Caucasian beneficiaries. There is no substantial variation in rates by gender. However, immunization rates are lowest for those beneficiaries age 85 years and older.

Technical Notes

The 1994 data presented in this document were developed using the same analytic specifications as the data for the 1993 report. Puerto Rico has been included in our analysis for the first time in 1994. To allow an accurate comparison of 1993 and 1994 national rates, Puerto Rico is not included in the 1994 national totals. Therefore, it is possible to make relatively accurate comparisons between these two years for influenza immunizations paid for by Medicare.

Data were derived from the Medicare National Claims History File for all services provided between September 1 and December 31, 1994 for influenza vaccinations given to Medicare beneficiaries age 65 years and older. In both years, bills were counted if they were submitted by March 31st of the next year, or December 31st the same year in the case of the institutional outpatient services. Over 10 million claims were identified for the analysis.

HCFA data include rates for all beneficiaries in the fee-for-service sector. As with the 1993 data, the current data for 1994 exclude Medicare beneficiaries receiving their medical care through managed care organizations. These providers cover approximately 6 percent of Medicare beneficiaries and do not submit claims for specific services, including flu vaccinations.

Also, rates are summarized by Caucasian and African American race. Rates for members of other racial/ethnic groups were not available for this data book. HCFA is currently striving to improve its ability to study utilization among other minority groups. Efforts are being made to include rates for other racial/ethnic beneficiaries in future reports.

• Limitations of HCFA's Data

Public health clinics, health fairs, and some hospitals may not bill Medicare for influenza vaccinations provided to Medicare beneficiaries. Since HCFA data are based on submitted claims, providers at such locations that do not bill Medicare are under-reported in this data book. The extent of these services may be substantial, particularly in states or counties with significant public health and outreach activities.

As noted, HCFA data do not include Medicare beneficiaries enrolled in HMOs or the immunizations they received. If a significantly higher number of HMO beneficiaries were provided influenza immunizations, the Medicare influenza vaccination rate for all beneficiaries combined (HMO and non-HMO enrollees) would be higher than what we report for the fee-for-service sector.



Some influenza immunizations are provided in January or February during a given "flu season", or billed after the "flu season" or cut-off period has ended. HCFA data do not capture vaccinations provided after December 31, 1994, or billed after March 31, 1995 (or December 31, 1994 for the institutional outpatient files).

- **Comparisons with other Data Sources**

Data from the Medicare Current Beneficiary Survey indicate that 10 to 20 percent of Medicare beneficiaries may have received influenza immunizations in 1993 that were not billed to Medicare. Data from the 1993 National Health Interview Survey also indicate a higher overall influenza immunization rate for persons age 65 and older (52 percent) than HCFA data demonstrate. However, that survey did corroborate our finding of a substantially lower (32 percent) influenza immunization rate for African Americans.

Sources of Additional Information

Additional information and hard copies of this data book can be obtained by calling HCFA's Statistical Information Hotline at 410-786-3689. In addition, tables from this data book can be accessed through the INTERNET at the following address : <http://www.ssa.gov/hcfa/hcfahp2.html>.